PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10767980

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER SMALL	
TOTAL CLAIMS OF								RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			7 Smir	nus 20=	*	8		X\$ 9=		OR	X\$18=	194
INDEPENDENT CLAIMS			/minus 3 = *					X43=		OR	X86=	6
ML	ILTIPLE DEPEN	IDENT CLAIM P	RESENT				- 1	+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2							ı	TOTAL		OR	TOTAL	aid
GLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A	} 	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	EST BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	-28	Minus	- d	5	0	İ	X\$ 9=		OR	X\$18=	
AME	Independent	.3	Minus	2	<u></u>		Ī	X43=		OR	X86=	
	FIRST PRESE	NTATION OF MI	JUITPLE DEF	PENDENT	CLAIM		Ī	+145=		OR	+290≠	
								TOTAL		OP.	TOTAL	
								ODIT. FEE		OR	ADDYT. FEE	L
		(Column 1) I CLAIMS	·	(Colum		(Column 3)	_		 			
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**				X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	0: 444	= .		X43=		OR	X86=	
Ľ	FIRST PRESE	NTATION OF ML	JLTIPLE DEP	ENDENI	CLAIM			+145=		OR	+290=	
								TOTAL DDIT. FEE	·	OR .	TOTAL	
(Column 1) (Column 2) (Column 3)												•
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus '	**		2		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									٠ ا		
• If the entry in column 1 is less than the ntry in column 2, write "0" in column 3.										OR	+290= .	
**	f the 'High st Nur	nber Previously Pa mber Previously Pa	id For IN THIS	S SPACE is	tess than	20, enter "20."	A	DOIT. FEE	·	OR ,	TOTAL ODIT. FEE	
		ber Previously Paid					foun	d in the app	r priate box	in col	umn 1.	٠.